

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:  
Bayfield County  
Planning and Zoning Depart.  
PO Box 58  
Washburn, WI 54991  
(715) 373-6138

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN  
BAYFIELD ZONING DEPT.  
Date Stamp Received:  
APR 15 2016

Permit #: 16-0057  
Date: 4-25-16  
Amount Paid: \$185  
Refund: 4-25-16

INSTRUCTIONS: No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department.  
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER			
Owner's Name: <u>Thimas + Julie Elessen</u>	Mailing Address: <u>1301 MacArthur</u>	City/State/Zip: <u>Ashland WI 54806</u>	Telephone: <u>715-682-3099</u>
Address of Property: <u>FR 500</u>	City/State/Zip: <u>Town of Barksdale</u>	Contractor Phone: <u></u>	Cell Phone: <u>715-209-1944</u>
Authorized Agent: (Person Signing Application on behalf of Owner(s))	Agent Phone: <u></u>	Plumber: <u></u>	Plumber Phone: <u></u>
Agent Mailing Address (include City/State/Zip):		Written Authorization Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
PROJECT LOCATION: <u>THOMAS + JULIE ELESSEN 1/4 NW 1/4 OF SECTION 14, TOWNSHIP 48 N, RANGE 5 W</u>	PIN: (23 digits) <u>04-008-2-48-05-19-2 03-000-2000</u>	Recorded Document: (i.e. Property Ownership) <u>984</u>	Page(s) <u>695</u>
Section <u>519</u> , Township <u>48</u> N, Range <u>5</u> W	Town of: <u>Barksdale</u>	Lot Size	Acreage <u>21.63</u>

<input type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? If yes--continue →	Distance Structure is from Shoreline: <u></u> feet	Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/> Non-Shoreland	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes--continue →	Distance Structure is from Shoreline: <u></u> feet		

Value at Time of Completion * include donated time & material	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
\$ 2000.00	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary	<input type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/>	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: <u></u>	
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or Vented (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Portable (w/service contract)	
		<input type="checkbox"/> Foundation			<input type="checkbox"/> Compost Toilet	
					<input checked="" type="checkbox"/> None	

Existing Structure: (if permit being applied for is relevant to it)	Length: <u>12' x 20'</u>	Width: <u></u>	Height: <u></u>
Proposed Construction:	Length: <u></u>	Width: <u></u>	Height: <u></u>

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input checked="" type="checkbox"/> Principal Structure (first structure on property)	<u>12' x 20'</u>	<u>240</u>
	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	<u>12' x 20'</u>	
	<u>with Loft</u>	<u>X</u>	
	<u>with a Porch</u>	<u>X</u>	
	<u>with (2nd) Deck</u>	<u>X</u>	
<input type="checkbox"/> Commercial Use	<u>with Attached Garage</u>	<u>X</u>	
	<input type="checkbox"/> Bunkhouse w/ <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	<u>X</u>	
	<input type="checkbox"/> Mobile Home (manufactured date)	<u>X</u>	
	<input type="checkbox"/> Addition/Alteration (specify)	<u>X</u>	
	<input type="checkbox"/> Accessory Building (specify)	<u>X</u>	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Accessory Building Addition/Alteration (specify)	<u>X</u>	
	<input type="checkbox"/> Rec'd for Issuance		
	<input type="checkbox"/> Special Use: (explain)	<u>X</u>	
	<input type="checkbox"/> Conditional Use: (explain)	<u>X</u>	
	<input type="checkbox"/> Secretarial Staff	<u>X</u>	
	<u>Other: (explain)</u>	<u>X</u>	

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property for any reasonable time for the purpose of inspection.

Owner(s): Thimas + Julie Elessen Date 4-15-16  
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)  
Authorized Agent: Julie Elessen Date 4-15-16  
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)  
Address to send permit



Show / in (1)  
Show / in (2)  
Show / in (3)  
Show / in (4)  
Show / in (5)  
Show / in (6)  
Show / in (7)  
Show / in (8)  
Show / in (9)  
Show / in (10)

County, WI



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Location



SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:  
Bayfield County  
Planning and Zoning Depart.  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN

RECEIVED  
JAN 05 2016  
Bayfield Co. Zoning Dept.

ENTERED Permit #:	16-0066
Date:	4-28-16
Amount Paid:	\$198
Refund:	1-5-16

INSTRUCTIONS: No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department.  
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

TYPE OF PERMIT REQUESTED: <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER			
Owner's Name: <u>Cole &amp; Sengue Pearson</u>	Mailing Address: <u>800 Mechanicae</u>	City/State/Zip: <u>WASHBURN WI 54891</u>	Telephone: <u>612-810-6326</u>
Address of Property: <u>73510 OSEN RD.</u>		City/State/Zip: <u>WASHBURN WI 54891</u>	Call Phone: <u>612-810-6326</u>
Contractor: <u>COLE PEARSON</u>	Contractor Phone: <u>612-810-6326</u>	Plumber: <u>ED'S MECHANICA</u>	Plumber Phone: <u>1-920-252-0528</u>
Authorized Agent: (Person Signing Application on behalf of Owner(s))		Agent Phone: <u>612-810-6326</u>	Agent Mailing Address (include City/State/Zip):
PROJECT LOCATION: Legal Description: (Use Tax Statement)		PLN: (23 digits) <u>04-002-2-48-04-18-2 05-002-90000</u>	Recorded Document: (i.e. Property Ownership) Volume <u>1149</u> Page(s) <u>154 40</u>
<u>1/4, 1/4</u>	Gov't Lot <u>2</u> Lot(s) <u>2</u> CSM <u>1149 154 04</u> Vol & Page	Lot(s) No. <u>1</u> Block(s) No.	Subdivision:
Section <u>18</u> , Township <u>48</u> N, Range <u>04</u> W	Town of: <u>BAKSDALE</u>	Lot Size <u>159X280</u>	Acreage <u>.77</u>
<input type="checkbox"/> Shoreland <input checked="" type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? If yes--continue <input checked="" type="checkbox"/> Is Property/Land within 1,000 feet of Lake, Pond or Flowage If yes--continue <input checked="" type="checkbox"/> Non-Shoreland	Distance Structure is from Shoreline: <u>19</u> feet Distance Structure is from Shoreline: <u>19</u> feet	Is Property in Floodplain Zone? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Are Wetlands Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Value at Time of Completion * include donated time & material: <u>\$20K</u>	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
<input type="checkbox"/> New Construction <input checked="" type="checkbox"/> Addition/Alteration <input type="checkbox"/> Conversion <input type="checkbox"/> Relocate (existing bldg) <input type="checkbox"/> Run a Business on Property <input checked="" type="checkbox"/> CHANGE	<input checked="" type="checkbox"/> 1-Story <input type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story <input type="checkbox"/> Basement <input type="checkbox"/> No Basement <input type="checkbox"/> Foundation <input checked="" type="checkbox"/> CHANGE	<input checked="" type="checkbox"/> Seasonal <input type="checkbox"/> Year Round <input type="checkbox"/> 3 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input checked="" type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary <input type="checkbox"/> Sanitary (Exists) Specify Type: <u>H-T</u> <input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/service contract) <input type="checkbox"/> Compost Toilet <input type="checkbox"/> None	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it)	Length: <u>46'</u>	Width: <u>28'10"</u>	Height: <u>16'</u>
Proposed Construction:	Length: <u>32'</u>	Width: <u>28'</u>	Height: <u>20'</u>

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input checked="" type="checkbox"/> Principal Structure (first structure on property)	( <u>46</u> X <u>28'10"</u> )	<u>1329</u>	
	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	( )		
	<input type="checkbox"/> with Loft	( )		
	<input type="checkbox"/> with a Porch	( )		
	<input type="checkbox"/> with (2 <sup>nd</sup> ) Porch	( )		
	<input type="checkbox"/> with a Deck	( )		
<input type="checkbox"/> Commercial Use	<input type="checkbox"/> with (2 <sup>nd</sup> ) Deck	( )		
	<input type="checkbox"/> with Attached Garage	( )		
	<input type="checkbox"/> Bunkhouse w/ ( ) sanitary, or ( ) sleeping quarters, or ( ) cooking & food prep facilities)	( )		
	<input type="checkbox"/> Mobile Home (manufactured date)	( )		
	<input checked="" type="checkbox"/> Addition/Alteration (specify) <u>ATTACHED GARAGE</u>	( <u>32</u> X <u>28</u> )	<u>896</u>	
	<input type="checkbox"/> Accessory Building (specify)	( )		
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Accessory Building Addition/Alteration (specify)	( )		
	<input type="checkbox"/> Special Use: (explain)	( )		
	<input type="checkbox"/> Conditional Use: (explain)	( )		
	<input type="checkbox"/> Other: (explain)	( )		

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application, I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Cole Pearson & Mary Pearson Date 12-29-15  
(if there are Multiple Owners listed on the Deed All Owners must sign (letter(s) of authorization must accompany this application)

Authorized Agent: \_\_\_\_\_ Date \_\_\_\_\_  
(if you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit \_\_\_\_\_  
Copy of Tax Statement  
If you recently purchased the property send your Recorded Deed  
APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Box below: Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: Proposed Construction  
(2) Show / Indicate: North (N) on Plot Plan  
(3) Show Location of (\*): (\*) Driveway and (\*) Frontage Road (Name Frontage Road)  
(4) Show: All Existing Structures on your Property  
(5) Show: (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)  
(6) Show any (\*): (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond  
(7) Show any (\*): (\*) Wetlands; or (\*) Slopes over 20%

SEE ATTACHED DRAWINGS

Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	129 Feet	Setback from the Lake (ordinary high-water mark)	41' to Addition 19.50 Feet
Setback from the Established Right-of-Way	107 Feet	Setback from the River, Stream, Creek	EXISTING 140.50 Feet
Setback from the North Lot Line	61 Feet	Setback from the Bank or Bluff	
Setback from the South Lot Line	19 Feet	Setback from Wetland	32 Feet
Setback from the West Lot Line	107 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	38 Feet	Elevation of Floodplain	605 Feet
Setback to Septic Tank or Holding Tank	19 Feet	Setback to Well	27 Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number: 16-025	# of bedrooms: 3	Sanitary Date: 11-16	
Permit Denied (Date):		Reason for Denial:			
Permit #: 16-00660	Permit Date: 4-28-16				
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming	<input type="checkbox"/> Yes (Deed of Record) <input checked="" type="checkbox"/> Yes (Fused/Contiguous Lots) <input checked="" type="checkbox"/> Yes (Deed of Record) <input type="checkbox"/> No	Mitigation Required Mitigation Attached	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Affidavit Required Affidavit Attached	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Granted by Variance (B.O.A.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Case #: 16-01B	Previously Granted by Variance (B.O.A.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Case #:		
Was Parcel Legally Created Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Inspection Record: main home reconstructed per Act 85. Permit issued previously. This permit is for a garage addition.		Zoning District: R-1		Lakes Classification (L. Supervision):	
Date of Inspection: 4-27-16		Inspected by: J. Brown, B. Murphy		Date of Re-Inspection:	
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No they need to be attached)		Approved pending conditions of BOA are followed. BOA permit + inspection required. Floodplain requirements shall be followed.			
Signature of Inspector:		Date of Approval: 4-26-16			
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>	

K:\data\ba\affidavit\2016\2Feb\pearson  
Bayfield County Planning & Zoning (4/16/16-9:46am)  
Decision prepared and submitted by: Atty Siegler's Office (3/21/16-2:41pm)

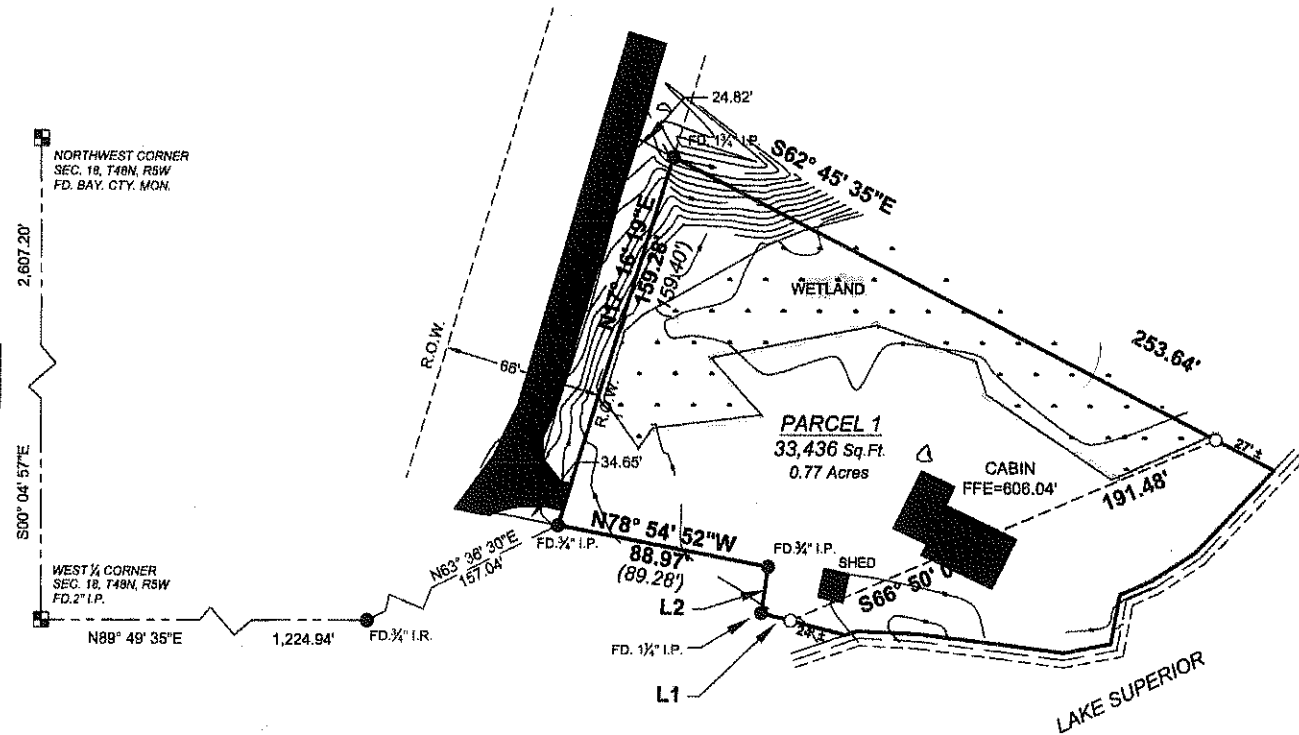
Printed by \_\_\_\_\_

PLAT OF SURVEY

A PARCEL OF LAND LOCATED IN GOVERNMENT LOT 2,  
SECTION 18, TOWNSHIP 48 NORTH, RANGE 6 WEST,  
TOWN OF BARKSDALE, BAYFIELD COUNTY, WISCONSIN.

BEARINGS ARE BASED ON THE  
WEST LINE OF THE NORTHWEST 1/4 OF SAID  
SECTION, MEASURED TO BEAR S00°04'57"E

LINE	BEARING	DISTANCE	REC'D AS
L1	N75°34'12"W	12.87'	
L2	N08°25'28"E	19.26'	19.81'



LEGAL DESCRIPTION:

A PARCEL OF LAND LOCATED IN GOVERNMENT LOT 2, SECTION 18, T48N, R5W,  
TOWN OF BARKSDALE, BAYFIELD COUNTY, WISCONSIN, MORE PARTICULARLY DESCRIBED  
AS FOLLOWS:

PARCEL 1:

COMMENCING AT THE NORTHWEST CORNER OF SAID SECTION; THENCE S00°04'57"E ALONG  
THE WEST LINE OF THE NORTHWEST 1/4, A DISTANCE OF 2,607.20 FEET TO THE WEST 1/4  
CORNER OF SAID SECTION; THENCE N89°49'35"E ALONG THE EAST - WEST 1/4 LINE A  
DISTANCE OF 1,224.94 FEET; THENCE N83°38'30"E A DISTANCE OF 157.04 FEET TO THE  
POINT OF BEGINNING; THENCE N17°18'19"E ALONG THE EASTERLY RIGHT OF WAY OF OLSEN  
RD. A DISTANCE OF 159.28 FEET; THENCE S62°45'35"E A DISTANCE OF 253.64 FEET TO A  
MEANDER CORNER, SAID CORNER BEING N82°45'35"W, 27 FEET MORE OR LESS FROM THE  
WATER'S EDGE OF LAKE SUPERIOR; THENCE S60°50'09"W ALONG A MEANDER LINE A  
DISTANCE OF 191.48 FEET TO A MEANDER CORNER, SAID CORNER BEING N75°34'12"W, 24  
FEET MORE OR LESS FROM THE WATER'S EDGE OF LAKE SUPERIOR; THENCE N75°34'12"W A  
DISTANCE OF 12.87 FEET; THENCE N08°25'28"E A DISTANCE OF 19.26 FEET; THENCE  
N78°54'52"W A DISTANCE OF 88.97 FEET TO THE POINT OF BEGINNING.

THE ABOVE DESCRIBED PARCEL OF LAND CONTAINS 33,436 SQUARE FEET, OR 0.77 ACRES,  
INCLUDING THAT LAND LYING BETWEEN THE MEANDER LINE AND WATER'S EDGE OF LAKE  
SUPERIOR.

SURVEYOR'S CERTIFICATE:

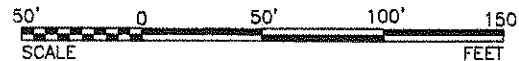
I, PATRICK A. MCKUEN, WISCONSIN PROFESSIONAL LAND SURVEYOR S-2992, DO HEREBY  
CERTIFY THAT THIS MAP WAS MADE AT THE DIRECTION OF COLE PEARSON, OWNER OF THE  
ABOVE DESCRIBED AND MAPPED PARCELS, AND THE INFORMATION SHOWN ON THIS MAP IS  
CORRECT AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF AND MEETS THE  
MINIMUM STANDARD REQUIREMENTS FOR SURVEYS UNDER AS-7 OF WISCONSIN ADMINISTRATIVE  
CODE.

DATED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_

PINE RIDGE LAND SURVEYING, LLC.  
PATRICK A. MCKUEN  
WI P.L.S. S-2992

LEGEND

○ - SET 1 1/4" IRON PIPE  
(1,234.00') - RECORDED AS



PATRICK A. MCKUEN, PLS  
29590 WOODLAND RD.  
ASHLAND, WI 54806  
PH: 715-682-2969  
WWW.PINERIDGESURVEYING.COM  
PMCKUEN@PINERIDGESURVEYING.COM

DATE: \_\_\_\_\_ REV: \_\_\_\_\_ BY: \_\_\_\_\_

Drawn by: P. MCKUEN  
Approved by: P. MCKUEN  
Date Approved: 10/23/15

FILED IN  
RECORD BOOK  
NO. \_\_\_\_\_  
PAGE \_\_\_\_\_  
T. WISCONSIN